

PART B - FEE(S) TRANSMITTAL

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7590

09/24/2007

Hollingsworth & Funk, LLC
Suite 125
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Rennae Johnson

(Depositor's name)

Rennae Johnson

(Signature)

November 26, 2007

(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
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10/797,951

03/11/2004

Petri Jarske

KOLS.092PA

4854

TITLE OF INVENTION: METHOD OF GENERATING SINUSOIDAL SIGNAL

11/29/2007 NNGUYEN2 00000046 503581 10797951

01 FC:1501
02 FC:15041440.00 DA
300.00 DA

APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE
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nonprovisional

NO

\$1400

1440

\$300

\$0

\$1700

1740.

12/24/2007

EXAMINER	ART UNIT	CLASS-SUBCLASS
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MALZAHN, DAVID H

2193

708-276000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.

☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list

(1) the names of up to 3 registered patent attorneys or agents OR, alternatively,

(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed. 3

HOLLINGSWORTH & FUNK, LLC

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Nokia Corporation

Espoo, Finland

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☒ Corporation or other private group entity ☐ Government

4a. The following fee(s) are submitted:

- ☒ Issue Fee
☒ Publication Fee (No small entity discount permitted)
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- ☐ A check is enclosed.
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☒ The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 503581 (enclose USPTO-929 form).

5. Change in Entity Status (from status indicated above)

- ☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. ☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Authorized Signature

Erin M. Nichols

Date

November 26, 2007

Typed or printed name

Erin M. Nichols

Registration No.

57,125

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: JARSKE Examiner: Malzahn, D.
Serial No.: 10/797,951 Group Art Unit: 2193
Filed: March 11, 2004 Docket No.: KOLS.092PA
Allowed: September 24, 2007 Confirmation No.: 4854
Title: METHOD OF GENERATING SINUSOIDAL SIGNAL

CERTIFICATE UNDER 37 CFR 1.8: The undersigned hereby certifies that this communication is being deposited in the United States Postal Service, as first class mail, in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on November 26, 2007.

By: 
Rennae Johnson

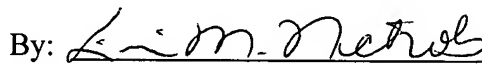
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Sir:

We are transmitting herewith the attached:

- ☒ Transmittal Sheet
- ☒ Please charge Deposit Account No. 50-3581 (KOLS.092PA) the amount of \$1,740.00 (\$1440.00 for the Issue Fee and \$300.00 for the Publication Fee).
- ☒ Part B-Issue Fee Transmittal.
- ☒ 1 Return Postcard.
- ☒ If appropriate, charge Deposit Account No. 50-3581 (KOLS.092PA) for any fee deficiency or overage.

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